Vincent Mennonite Church

Permission Slip for Youth Event/Trip

Participant's Name: _____ Grade '24 -'25: _____ Age: _____
Address: _____
Medical Conditions: _____
Current Medications: _____
Parent/Guardian: _____ Phone _____
Alternate Emergency Contact: _____ Phone _____
Relationship to participant: _____
Special circumstances that we should be aware of: _____
_____

I, _____ (Participant's Parent/Guardian's Name), hereby grant permission for my child, _____ (Participant's Name), to participate in the Vincent Mennonite Church's youth outing **Christmas Caroling on December 14, 2024.** I acknowledge that there are inherent risks associated with any activity and I assume full responsibility for those risks.

I understand that travel will be involved, and I hereby give permission for my child to travel with the adult leader or leaders of this activity.

I understand that it may be necessary for emergency medical treatment to be administered if an injury or illness occurs during activities. I grant permission to an adult leader of this activity, my appointed agent if needed, to provide consent for any medical diagnosis, treatment, and hospitalization advised by a licensed physician, surgeon, or dentist in the state where these services are rendered. This may include visits to a doctor's office and/or hospital.

I understand that it is the responsibility of me and/or my child to follow all rules as set forth by the church concerning this event. Further, I acknowledge that any misconduct or misbehavior on the part of my child or myself may result in immediate dismissal from the event, at the discretion of the church staff and volunteers.

I also agree to release and hold harmless the church and its staff from all liability related to injury or illness that may occur to my child in relation to this event or any activity associated with it. In the event of an emergency, I consent to medical treatment provided by a doctor or hospital of the church's choice.

I have read and understand all regulations associated with this event, as well as the above statements.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____